

7 2002 2	Attorney's Docket No. <u>001560-377</u>					
A man	IN THE UNITED STATES PATE	NT AND TRADEMARK OFF	ICE			
A& B.	IN THE UNITED STATES TATE	MI AND INADEMAKK OFF	RECEIVED			
4ff re Pate	ent Application of)	AUG 3 0 2002			
Keiko SAKAKIBARA et al.) Group Art Unit: 1655	TECH CENTER 1600/2900			
Application No.: 09/446,089) Examiner: Juliet C. Einst	mann			
Filed: D	ecember 17, 1999	Confirmation No.: 1763				
H	GENE ENCODING A PROTEIN HAVING AURONE SYNTHESIS ACTIVITY					
	AMENDMENT/REPLY T	TRANSMITTAL LETTER				
	Commissioner for Patents ton, D.C. 20231					
Sir:						
Encl	losed is a reply for the above-identified p	atent application.				
[X]	[X] A Petition for Extension of Time is also enclosed.					
[]	[] A Terminal Disclaimer and a check for [] \$55.00 (248) [] \$110.00 (148) to cover the requisite Government fee are also enclosed.					
[X]	Also enclosed is Nakayama et al article .					
[]	Small entity status is hereby claimed.					
[]	Applicant(s) request continued examination under 37 C.F.R. § 1.114 and enclose the [] \$370.00 (279) [] \$740.00 (179) fee due under 37 C.F.R. § 1.17(e).					
	[] Applicant(s) previously submitted requested.	, on, for which continued	l examination is			
[]	[] Applicant(s) request suspension of action by the Office until at least _, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.					

A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a)

(146/246) is also enclosed.

No additional claim fee is required.

[X] An additional claim fee is required, and is calculated as shown below:

		AMENDED	CLAIMS		
	No. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims	18	MINUS 20 =	0	× \$18.00 (103) =	
Independent Claims	4	MINUS 3 =	1	× \$84.00 (102) =	84.00
If Amendment adds mu	ltiple depend	ent claims, add \$280	0.00 (104)	٠.	
Total Amendment Fee					84.00
If small entity status is	claimed, sub	tract 50% of Total A	mendment F	ee	
TOTAL ADDITIONA	L FEE DUE	FOR THIS AMEN	IDMENT		\$84.00

[X]	A claim fee in	the amount of \$	84.00 is	enclosed.
[]	Charge \$	to Deposit	Account No.	02-4800.

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Registration No. 36,607

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620

Date: August 27, 2002

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